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what a flashback can be, how did Mr. Moran relate these flashbacks to you?

A. So what he described were sometimes just clearly memories of what was going on and sometimes a mild to moderate re-experiencing of it.

Q. When you say mild to moderate re-experiencing of it, would that fall into the range where he loses contact with reality and he's actually in the experience again?

A. No.

Q. Did he ever relate a flashback to you that fell within that extreme range?

A. Not that I recall.

Q. Did you record in your notes at any point how you characterized the flashback along the continuum you just testified to?

A. I would probably have just reported that there were flashbacks, probably not anything more detailed.

Q. Did the flashbacks change in frequency during the course of your

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treatment of Mr. Moran?

A. They certainly have reduced.

Q. Can you put a quantity on that reduction in flashbacks?

A. Yes. They're rare now, and usually come on by a trigger of some sort.

Q. What are the triggers that induce a flashback for Mr. Moran?

A. It could be anywhere from going to a train station to seeing something on a television show that is similar to his experience, for example, at the jail.

Q. When you say they're relatively rare now, at what point in time did you detect a falloff in flashbacks of significance to you?

A. I think it was gradual over time. I don't recall any specific time where I said, ah, that's it.

Q. Nightmares, did Mr. Moran report nightmares?

A. He has.

Q. And how frequently did he report nightmares to you?

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A. Initially, they were every day or couple of days. He started some medication to help him sleep at night. And I think that the sleep was deep enough so that he didn't recall his dreams at night.

Q. Okay. So at a certain point, as a consequence of taking this medication, it's unknown whether he had nightmares?

A. Yes.

Q. When did that occur that the medication was prescribed?

A. That was early on. And I don't remember exactly when.

Q. Did Mr. Moran ever relate to you the content of the nightmares he was experiencing?

A. I'm sure we talked about it. I don't recall any of them specifically.

Q. Did you make any record in your notes of therapy sessions as to the content of nightmares?

A. I probably did not.

Q. Did the content of the nightmares vary in form or imagery?

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Q. I take it he's aware that you're giving deposition testimony today?

A. Yes.

Q. Did that trigger any anxiety on his part?

A. I believe it did, but this is the, if you'll remember, the second time this has been scheduled. So the first he was worried about it, and was really concerned about how I was reacting to it, because he remembered his reaction to his deposition, and he was worried about it.

Q. Did he have any discussion with you as to what your testimony would include?

A. No.

Q. We're now nearly two and a half years or so post incident. How would you describe Mr. Moran's current condition compared to his condition let's say within the first two weeks following the incident?

A. Outside of being at a railroad station or on a train, the rest of his life is much calmer and he's much improved. So

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daily living stuff is certainly within the normal range.

When he gets to a train station, then it begins to get pretty dicey. He gets anxious, stressed out. Getting on a train is difficult to near impossible. And certainly coming towards New York on a train would be impossible for him at this point.

Q. Do you anticipate discharging him from treatment at some period in time?

A. Someday that's going to happen. Right now I don't see he is making a full recovery from the PTSD and the trauma. So that's going to be an issue.

But at some point he's not going to be -- we're not going to be able to treat to gain improvement. I think this is probably -- that aspect of it is probably going to stay with him. The rest of his life, as I said, it's pretty much within the normal range.

Q. Forgive me if I've asked this: Have you consulted with the psychiatrist